L1400035129

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900256990509

02/28/14--01016--022 **130.00

2014 FEB 28 AM DE OR

MAR - 3 2014 T CLINE

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: <u>G&L Land Investment Group, LL</u> Name of Li	C mited Liability Company	
The en	closed Articles of Organization and fee(s)	are submitted for filing.	
Please	return all correspondence concerning this r	natter to the following:	
	Larry Holbrook	Name of Person	
•		Name of Forson	
	G&L Land Investment Group, LLC		
		Firm/Company	
ē	725 Primera Blvd, Ste 115		201 Fa ^S
		Address	2014FEB
			B 28
	<u>Lake Mary, Florida 32746</u> (City/State and Zip Code	<u> </u>
. ∐ho	olbrook@premiermgmtcfl.com	·	· 🗀 🚾 🕶
	E-mail address: (to be use	ed for future annual report notification)	
For furt	her information concerning this matter, ple	ase call:	60
l arry H	folbrookat (407) 333-7787	
	Name of Person	Area Code Daytime Telephone Number	
. .			
_	d is a check for the following amount:		
-∟ \$125. 0	O Filing Fee ✓ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Certified Copy (additional copy is enclosed) Certified Copy (additional copy	f Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
G&L Land Investment Group, LLC	
(Must end with the words "Limited L	ciability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
725 Primera Blvd, Ste 115	725 Primera Blvd, Ste 115
Lake Mary, Florida 32746	Lake Mary, Florida 32746
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an individual or)
The name and the Florida street address of the registered a	gent are.
<u>Larry Holbrook</u> Name	
286 Via Siena Lane Florida street address (P.O. Box I	NOT acceptable)
Lake Mary,	FL 32746
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	rice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in ref. S
(CONTINUE	D) 201
Page 1 of 2	2014 FEB 28 AH II: 0@

MBR" = Authorized Member GR" = Manager BR BR	Gina Holbrook 286 Via Siena Lane Lake Mary, Fl 32746 Larry Holbrook 286 Via Siena Lane Lake Mary, Fl 32746
BR	286 Via Siena Lane Lake Mary, Fl 32746 Larry Holbrook 286 Via Siena Lane Lake Mary, Fl 32746
	286 Via Siena Lane Lake Mary, Fl 32746 Larry Holbrook 286 Via Siena Lane Lake Mary, Fl 32746
BR	Lake Mary, Fl 32746 Larry Holbrook 286 Via Siena Lane Lake Mary, Fl 32746
BR	Larry Holbrook 286 Via Siena Lane Lake Mary, Fl 32746
BR	286 Via Siena Lane Lake Mary, Fl 32746
	286 Via Siena Lane Lake Mary, Fl 32746
	Lake Mary, Fl 32746
e attachment if necessary)	
ing.) I: Other provisions, if any.	
	Man
QUIRED SIGNATURE:	
QUIRED SIGNATURE:	
OUIRED SIGNATURE:	r an authorized representative of a member.
OUIRED SIGNATURE: Signature of a member of (In accordance with section 605.0203)	(1) (b), Florida Statutes, the execution of this document
OUIRED SIGNATURE: Signature of amember of (In accordance with section 605.0203) constitutes an affirmation under the pe	(1) (b), Florida Statutes, the execution of this document nalties of perjury that the facts stated herein are true.
OUIRED SIGNATURE: Signature of amember of (In accordance with section 605.0203) constitutes an affirmation under the per I am aware that any false information is	(1) (b), Florida Statutes, the execution of this document nalties of perjury that the facts stated herein are true. submitted in a document to the Department of State
OUIRED SIGNATURE: Signature of Amember of Constitutes an affirmation under the per I am aware that any false information is constitutes a third degree felony as pro	(1) (b), Florida Statutes, the execution of this document nalties of perjury that the facts stated herein are true. submitted in a document to the Department of State evided for in s.817.155, F.S.)
Constitutes a third degree felony as pro	(1) (b), Florida Statutes, the execution of this document nalties of perjury that the facts stated herein are true. Submitted in a document to the Department of State evided for in s.817.155, F.S.)
OUIRED SIGNATURE: Signature of Amember of Constitutes an affirmation under the per I am aware that any false information is constitutes a third degree felony as program of the per I am aware that any false information is constitutes a third degree felony as program of the per I am aware that any false information is constitutes a third degree felony as program of the per I am aware that any false information is constituted as the per I am aw	(1) (b), Florida Statutes, the execution of this document nalties of perjury that the facts stated herein are true. Submitted in a document to the Department of State ovided for in s.817.155, F.S.) 4 Holdward of printed name of signee
OUIRED SIGNATURE: Signature of Amember of Constitutes an affirmation under the per I am aware that any false information is constitutes a third degree felony as program of the per I am aware that any false information is constitutes a third degree felony as program of the per I am aware that any false information is constitutes a third degree felony as program of the per I am aware that any false information is constituted as the per I am aw	(1) (b), Florida Statutes, the execution of this document nalties of perjury that the facts stated herein are true. Submitted in a document to the Department of State ovided for in s.817.155, F.S.) 4 Holdward of printed name of signee Filing Fees:

Page 2 of 2